FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR NIFORM LIMITED OFFERING EXEMPTION

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Expires: IVIQY

Estimated average burden hours per response.....16.00

SEC USE ONLY						
Prefix		Serial				
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Name of Offering (check if this/is an amendment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	1302217
A. BASIC IDENTIFICATION DATA	
I. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Nanno Solutions Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
34126 Blue Jay Terrace, Fremont, CA 94555	(510) 299-7778
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Same as above	
Brief Description of Business	
Electronic design automation	
Type of Business Organization	PROCESSED
	lease specify): OCT 2 6 2004
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization: 0 8 0 4 2 Actual Estim Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9

		a	ENTIFICATION DATA		San talah dari dari dari dari dari dari dari dari
2. Enter the information re	quested for the fo	llowing:			
 Each promoter of t 	he issuer, if the is	suer has been organized w	vithin the past five years;		
 Each beneficial ow 	ner having the pow	ver to vote or dispose, or di	rect the vote or disposition	of, 10% or more of	f a class of equity securities of the issue
 Each executive off 	icer and director o	of corporate issuers and of	corporate general and man	naging partners of	partnership issuers; and
 Each general and r 	nanaging partner o	of partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	14-34-38-7-17-7-17-17-17-17-17-17-17-17-17-17-17			
Business or Residence Addre 38711 Chimaera Circle,	•	Street, City, State, Zip C 536	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Keijing Song	f individual)				
Business or Residence Addre		Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Mark Rygh	f individual)		,		
Business or Residence Addre 34877 Eastin Drive, Union		Street, City, State, Zip Co	ode)	· · - · · · · · · · · · · · · · · · · ·	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Fred Ki	f individual)				
Business or Residence Addre 10530 San Felipe Road,		Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	· · · · · · · · · · · · · · · · · · ·			
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		MANAGER PARTY.
	(Use bla	ink sheet, or copy and use	additional copies of this s	heet, as necessary)

	1	· · · · · · · · · · · · · · · · · · ·			B. Ï	NFORMAT	ION ABOU	T OFFERI	NG				
1.	Has the	issuer sold	l, or does th	ne issuer ir	ntend to se	ll, to non-a	ccredited i	nvestors in	this offer	ing?		Yes	No
				Ans	wer also ir	Appendix	, Column 2	, if filing 1	under ULC	E.			
2.									\$ <u>30,</u>	000.00			
3.	Does th	e offering	permit join	t ownershi	p of a sing	le unit?		•••••	•••••	····		Yes	No
4.	Enter th	ie informat	ion request	ed for eac	h person v	vho has bee	en or will b	e paid or p	given, dire	ctly or ind	irectly, any	_	_
	If a pers	on to be lis s, list the na	ted is an ass	sociated pe roker or de	rson or age aler. If me	ent of a brol ore than five	cer or deale e (5) persor	r registered is to be list	I with the S ed are asso	SEC and/or	he offering. with a state ons of such		
Ful	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (N	lumber and	i Street, C	ity, State, Z	(ip Code)						
Nai	me of Ass	sociated Br	oker or Dea	aler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)		••••••		***************************************			☐ Al	1 States
	AL	AK	\overline{AZ}	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
		30	וענבו	[IIN]		[01]	<u> </u>	VA.		<u>[wv]</u>	WI	WI	PK
Ful	l Name (Last name	first, if indi	ividual)									
Bus	siness or	Residence	Address (N	Number an	d Street, C	City, State,	Zip Code)						
Nar	ne of Ass	sociated Br	oker or De	aler	··-		<u>-</u> -						
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*****************	***************************************	······	☐ Al	States
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F. 1	RI	SC	SD Sin di	[TN]	TX	UT	VT	VA	WA	WV	WI	WY	PR
rui	i Name (Last name	first, if indi	ividuai)									
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Nai	me of As	sociated Br	oker or De	aler							·		
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)		••••••	••••••	••••••••	·····		☐ All	States
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	IL XT	IN NE	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C — proceeds to the issuer."			\$
١.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and fthe payments listed must equal the adjusted gross		·
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	[\$	S
	Purchase of real estate	[\$	\$
	Purchase, rental or leasing and installation of mac and equipment	chinery [\$	<u></u> \$
	Construction or leasing of plant buildings and fac	ilities[\$	\$
	Acquisition of other businesses (including the val offering that may be used in exchange for the asset issuer pursuant to a merger)	ets or securities of another	¬ s	□ \$
	Repayment of indebtedness	•		
	Working capital	·		
	Other (specify):	•		_
			s	\$
	Column Totals	[\$ 30,000.00	\$_0.00
	Total Payments Listed (column totals added)		\$ <u></u> 30	0,000.00
		D. FEDERAL SIGNATURE		
igi	issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange Commis	sion, upon writte	
ssı	ter (Print or Type)	Signature	Date	
Na	nno Solutions Inc.	the To Cace	10/18/04	
laı	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
	g-Jin Guan	Issuer's Counsel		
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- ATTENTION -----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		L. STATE SIGNAT	URE			
1.	Is any party described in 17 CFR 230.262 presently provisions of such rule?				Yes	No
	See Appen	dix, Column 5, for	state response.			
2.	The undersigned issuer hereby undertakes to furnish D (17 CFR 239.500) at such times as required by st	•	rator of any state in	which this notice is f	iled a no	tice on Form
3.	The undersigned issuer hereby undertakes to furnishissuer to offerees.	h to the state admin	istrators, upon writt	en request, informat	tion furn	ished by the
4.	The undersigned issuer represents that the issuer is limited Offering Exemption (ULOE) of the state in v of this exemption has the burden of establishing that	which this notice is t	filed and understand			
	uer has read this notification and knows the contents to buthorized person.	oe true and has duly c	caused this notice to	oe signed on its beha	lf by the	undersigned
ssuer (1	(Print or Type) Sign	ature		Date		
lanno Solutions Inc. 10/18/04						

Title (Print or Type)

issuer's Counsel

Instruction:

Name (Print or Type)

Hong-Jin Guan

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AI	PPENDIX				
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 5 Disqualifica under State U (if yes, atta explanation amount purchased in State waiver grant waiver grant control of the co		ification ite ULOE attach ation of		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
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AZ						•			
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		#V		APP	ENDIX				
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 Finvestor and rchased in State C-Item 2)		Disqual under Sta (if yes, explana waiver (Part E-	te ULOE attach ition of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
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1		2	3	3 4 5 Disqualif			4			
	to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				ate ULOE, attach ation of granted)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
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